



Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

November 24, 2004

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of A & R Food Company, d.b.a. EL Sitio, 2785 South 17<sup>th</sup> Street requesting a class I liquor license.

Amin Ghaffar, president has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Amin Ghaffar was born in Shiraz, Iran. He attended the University of Nebraska graduating in 1998.

Amin Ghaffar employment history is as follows:

1992 – Present	Project Engineer, Lincoln Plating	Lincoln, NE.
1985 – 1992	Manager, EL Sitio	Lincoln, NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Business Report

Completed by Inv. Fosler #843

Business Name: EL SITO

Address : 2785 So 17TH Phone: 476-0414

Type of Investigation : ☒ Purchase ☐ Upgrade ☐ Expansion ☐ New  
☒ Owner ☒ Manager Other: \_\_\_\_\_

Type of Business: Rest

Liquor Class A B C D ☒ I J K Catering Other: \_\_\_\_\_

Ownership: ☒ Corporation ☐ Partnership ☐ Individual

Amount Financed: - Source: -

Lease Agreement: 3yr 2000 mo

Sales: %Food: 90 %Liquor: 10

Located: ☒ Commercial ☐ Industrial ☒ Residential

Traffic Flow: Moderate Off Street Parking: ☒ Yes ☐ No

Ready for Operation: ☒ Yes ☐ No/ Est Date: \_\_\_\_\_

Food Service: ☒ Yes ☐ No Employees: F/T 2 P/T 6

Est Seating: 48 Est Daily Customers 100-150

Hours of Operation: M-TH 11am-10pm F-S 11-11 S 12-9

Any Additional Comments: \_\_\_\_\_

Liquor License Investigation

Business (DBA) EL SITO

☒ Manager ☒ Owner Other \_\_\_\_\_

Name: Amin Shaffar

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ? ☒ No Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license ? ☒ Yes No N/A

How is applicant if not an owner to be paid ? Salary Hourly

How many hours will applicant be at the establishment ? 40-50

Any other employment ? No ☒ Yes explain Lincoln Plumbing

Any previous experience with a liquor license ? ☒ Yes No

Any criminal convictions ? ☒ No Yes  
Comments \_\_\_\_\_

Is applicant a property owner in Lincoln ? ☒ Yes No

Is applicant involved in any civil litigation ? ☒ No Yes  
Comments \_\_\_\_\_

☒ Photo ☒ Records Check ☒ References

Comments \_\_\_\_\_

Interview Date 11 / 24 / 04

# STATE OF NEBRASKA

12-13-04  
9/30



Mike Johanns  
Governor

November 16, 2004

City Clerk  
555 South 10<sup>th</sup> Street  
Lincoln NE 68508

## NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe  
Executive Director

301 Centennial Mall South, 5th Floor  
P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

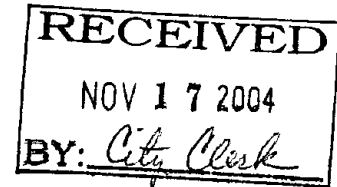
Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

A4-128460  
112

A + R Food Company  
dba EL Sitio  
2785 So. 17th St.  
Class I



Dear Local Governing Body:

45 days 12/31

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

### TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

11-24-04/  
10:30  
Interview

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Michelle Porter*

Michelle Porter  
Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

APPLICATION FOR LICENSE  
Nebraska Liquor Control Commission  
PO Box 95046,  
301 Centennial Mall South  
Lincoln, NE 68509-5046

I# 66404 Local  
TAA#404

<http://www.nol.org/home/NLCC>  
Phone: (402) 471-2571  
Fax: (402) 471-2814

**RECEIVED**  
NOV 15 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate 8. Required areas marked by a red asterisk ( \* )

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

5 CK#  
5635-45.00

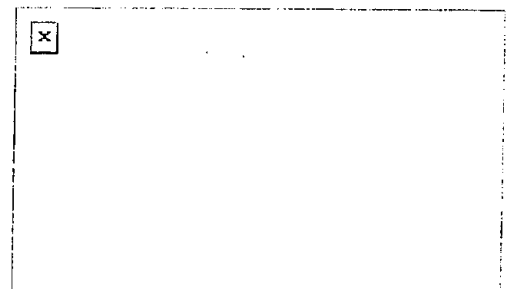
TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name Matthew F. Wright	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name Wright Law Office, LLC	Address 811 S. 13th St., Ste. 101
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached		

SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants			
Trade Name (name of business) El Sitio		Telephone Number at premise to be licensed 402-476-0414	
1) Street Address of Proposed licensed premise 2785 S. 17th Street		2) Mailing Address for receipt of Liquor Control Commission mailings 811 S. 13th St., Ste. 101	
City Lincoln	County Lancaster	City Lincoln	County Lancaster
Zip Code 68502	Is this located inside the city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No	Zip Code 68508	

#### DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

See attached Exhibit 'D'



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

**RECEIVED**

DESCRIPTION OF PREMISES LEASED AND  
SUBJECT OF LIQUOR LICENSE APPLICATION NOV 15 2004

Physical Address: 2785 S. 17<sup>th</sup> Street  
Lincoln, NE 68502

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

Description: One story building 40' X 48' plus an 8' X 14' storage unit  
located in the Northwest corner of the lot



# Lancaster County

County Assessor

Building Sketch/Section Information

# RECEIVED

exhibit 'D'

NOV 15 2004

InterLine

NEBRASKA LIQUOR

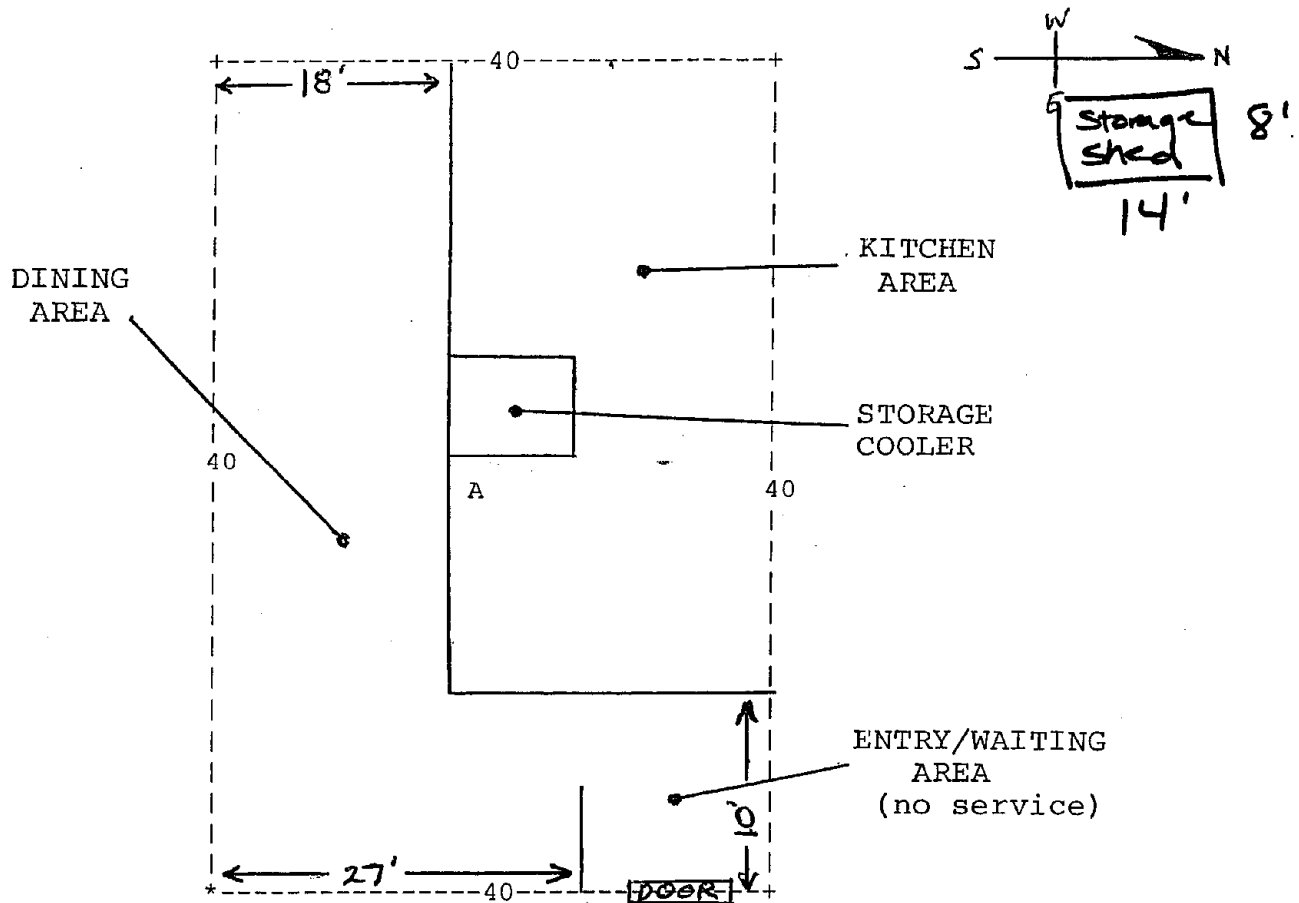
CONTROL COMMISSION

Parcel Identification No: 10-36-332-024000

## Building Sketch:

\*\*\*\*\*

### BUILDING SKETCH



### Building Sections

Building Section ID	Building Section	Square Footage
A	COM 1ST FLOOR	1,600

Land and Miscellaneous

Commercial Information

Display Building 01

Building Sketch

Display Building 01

Map

Parcel Information

Treasurer's Information

County Assessor Property Information



## SECTION B

OTHER INFORMATION  
REQUIRED \*

	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	<p>See attached exhibit 'A'</p> <p>Rep# 09250</p>
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached exhibit 'B'
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	

## SECTION B

OTHER INFORMATION  
REQUIRED \*

	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	<p>See attached exhibit 'A'</p> <p>Rep# 69250</p>
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached exhibit 'B'
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input checked="" type="radio"/></p>	<p>No <input type="radio"/></p>	<p>Dell personal computer presently leased by Nebraska Food Corporation, the prior owner of the business and owned by Dell Financial Services.</p>
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Tier One Bank, Lincoln, Nebraska Authorized Signors: Amin Ghaffar and Rebecca Amini</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>n/a</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Amin Ghaffar: 20 hours per week.</p>		

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>Worked for <b>8</b> years as manager of El Sitio, the restaurant which is the subject of this application as an employee of Nebraska Food Corporation, which held a Class J Liquor License.</p>
<p>14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)</p>	<p>Lease agreement attached as Exhibit 'C'</p>
<p>15. When do you intend to open for business?</p>	<p>October 6, 2004</p>

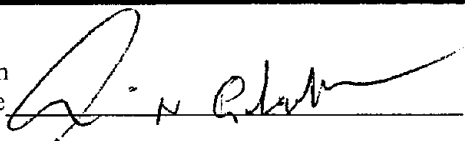
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Amin Ghaffar, Rebecca Amini	1992	Present	Lincoln, Nebraska

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign  
here

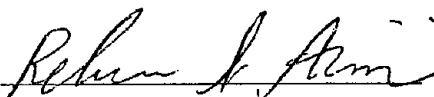


Sign  
Here

Sign  
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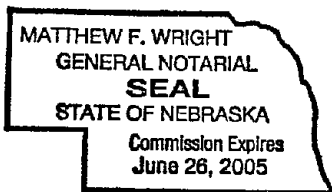


Sign  
Here

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Sign  
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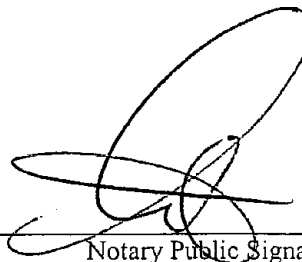
Subscribed in my presence and sworn to before me this 6 day of October, 2004



(SEAL)

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign  
here



Notary Public Signature

Verify & Print form

**RECEIVED**

FORM 54010  
1  
REV 1/01  
OCT 06 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

**Corporation/LLC Application for License - Form 3**  
Nebraska Liquor Control Commission

**RECEIVED**

NOV 15 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
  - 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses.
  - 3) Information regarding spouses must be completed
- Required areas marked by a red asterisk ( \* )

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

A & R Food Company, LLC

Total Number of Shares (if corporation)

n/a

Corporate Street Address

5410 Derby Drive

Mailing address for receipt of Liquor Control Commission Mailings

811 S. 13th St., Ste. 101

Corporate Telephone Number

402-476-0414

City

Lincoln

County

Lancaster

State

NE

Zip Code

68516

Name of Registered Agent

Wright, Matthew F.

Name of Proposed Manager

Ghaffar, Amin

**IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER**

Name

Ghaffar, Amin

Title

Manager

Date of Birth

Social Security Number

\*

Home Address (1)

5410 Derby Drive

City

Lincoln

State

NE \*

Zip Code

68516 \* -

Home Telephone Number

402-420-3003 \*

**PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES**

Name of Officers, Directors, Members and Spouses.  
**Give Last Name, First Name, Middle, Maiden, and any aliases**

Social Security  
Number

Date of Birth

Title

Name

Ghaffar, Amin

Member/Manager

Spouse Name

Amini, Rebecca

n/a

Partner Number of Shares / % 100

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.  
**Give Last Name, First Name, Middle, Maiden, and any aliases**

Social Security  
Number

Date of Birth

Title

Name

Please indicate below your corporate tax year with the IRS  
Starting date: January 1      Ending date: December 31

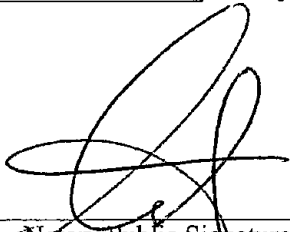
State of NEBRASKA

)

) ss.

)

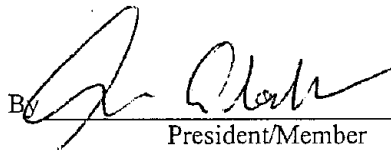
LANCASTER County



Notary Public Signature & Seal

**MATTHEW F. WRIGHT**  
**GENERAL NOTARIAL**  
**SEAL**  
**STATE OF NEBRASKA**  
Commission Expires  
June 28, 2005

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

By  President/Member

Secretary/Member

Verify Form and Print

FORM 35-4183  
REV. 02/01

**RECEIVED**  
CCT 06 2004  
NEBRASKA LIQUOR  
CONTROL COMMISSION

RECEIVED

NOV 15 2004

# Application for Corporate Manager

\*Must Be A Nebraska Resident\*

Please submit in Triplicate

NEBRASKA LIQUOR  
CONTROL COMMISSION

Return to: Nebraska Liquor Control Commission, PO Box 95046  
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk ( \* )

## LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

A & R Food Company, LLC

\*

Class & License number

Class I - Pending

\*

Trade Name of Licensed Premise

El Sitio

\*

Street Address of Licensed Premise

2785 S. 17th Street

\*

City

Lincoln

\*

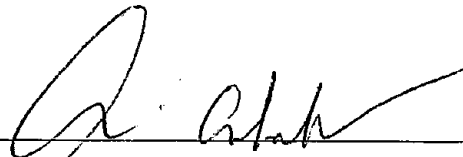
County

Lancaster

\*

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:



## APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Ghaffar, Amin

\*

Sex *	
F	M
<input type="radio"/>	<input checked="" type="radio"/>

Social Security Number

\*

Date of Birth

\*

Place of Birth

Shiraz, Iran

Home Street Address

5410 Derby Drive

\*

City

Lincoln

\*

County

Lancaster

\*

State

NE

\*

Zip Code

68516

\*

Home Telephone Number

402-420-3003

\*

Business Telephone Number

402-476-0414

\*

Drivers License Number

\*

State

NE

\*

RECEIVED  
OCT 06 2004  
NEBRASKA LIQUOR  
CONTROL COMMISSION

Are You Married? \* Yes ☒ No ☐ If Yes, You must complete the following:

## SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)



Full Name (Last, First, Middle, Maiden)  
Amini, Rebecca

Social Security Number

Drivers License Number	State NE
------------------------	-------------

Date of Birth

Place of Birth  
Tehran, Iran

\* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No  
☐ ☒

\* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No  
☐ ☒

\* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No  
☐ ☒

\* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

Yes No  
☒ ☐

\* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No  
☒ ☐

**RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

Year  
From To

Applicant: City & State

Spouse: City & State  
Lincoln, Nebraska 1992 Date

Spouse: City & State

Spouse: City & State

Spouse: City &amp; State

Name of Employer	Year
Lincoln Plating Company	From To 1992 Date
Name of Supervisor	Telephone Number
Yadi Kamelian, Vice President	402-475-3671


	Year	
Name of Employer	From	To
Nebraska Food Corporation	1984	1992
Name of Supervisor	Telephone Number	
Dory Marhamat	408-898-6465	

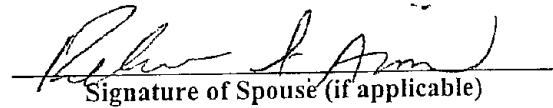
STATE OF NEBRASKA )  
 ) SS  
COUNTY OF )

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

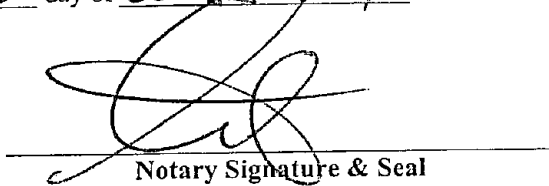
The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

  
Signature of Applicant

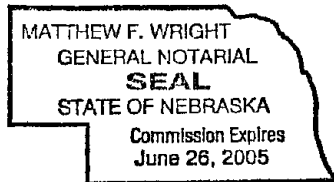
  
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this  
6 day of October 2004.

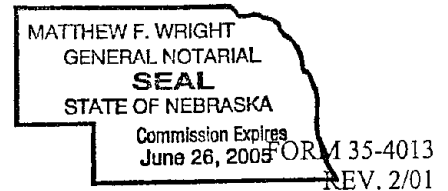
Subscribed in my presence and sworn to before me this  
6 day of October 2004.

  
Notary Signature & Seal

  
Notary Signature & Seal



Verify and Print



**RECEIVED**  
OCT 06 2004  
NEBRASKA LIQUOR  
CONTROL COMMISSION